## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Alison Hannah et al.

Title:

METHODS OF TREATING

CANCER AND RELATED

**METHODS** 

Appl. No.:

10/706,328

Filing Date:

11/12/2003

Examiner:

James D. Anderson

Art Unit:

1614

Confirmation 6441

Number:

## **AMENDMENT TRANSMITTAL**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment and reply under 37 C.F.R. 1.111 in the aboveidentified application.

## The fee required for additional claims is calculated below:

	Claims							
	As		Previously	y	Claims			Additional
	Amended		Paid For		Present		Rate	Claims Fee
Total Claims:	54	-	58	_ ==	0	X	\$50.00 =	\$0.00

Independent Claims:	5	-	8	=	0	Х	\$210.00		\$0.00
First pr	esentation	n of any	Multipl	e Depend	ent Claim	s: +	\$370.00	= -	\$0.0
					CLAI	MS FE	E TOTAL	= -	\$0.00
[X] Applicant hotal numbe					time unde	er 37 C.	F.R. §1.13	6(a)	for the
[ ] Extension fo	r respons	e filed w	ithin th	e first mo	nth:		\$120.00	)	\$0.00
[ ] Extension fo	Extension for response filed within the second month:								\$0.00
[X] Extension fo		\$1,050.00	) .	\$1,050.00					
[ ] Extension fo	r respons	e filed w	ithin th	e fourth n	nonth:		\$1,640.00	)	\$0.00
[ ] Extension fo	r respons	e filed w	ithin th	e fifth mo	nth:		\$2,230.00	)	\$0.00
				· E	EXTENSI	ON FE	E TOTAL:	:	\$1,050.00
[ ] Statutory Di	isclaimer	Fee und	er 37 C.	F.R. 1.20	(d):		\$130.00	)	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL								:	\$1,050.00
[ ]		Sm	nall Enti	ity Fees A		tract ½	of above):	:	\$0.00
[]		Sm	nall Enti	-	pply (sub		of above): ously Paid:		\$0.00 \$0.00

The above-identified fees of \$1,050.00 are being paid by credit card via EFS-Web.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment instructions in EFS-Web being incorrect or absent, resulting in a rejected or incorrect credit card transaction, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Atty. Dkt. No. 072121-0366 (19993.0005)

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 16, 2007

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